

Employee Request for Annual Leave

Employee Name: CHMES	·
I request PAID leave from work as follows:	
Commencing: 26 HH OCOBER	
Ending:	
Number of days to be taken:	
I request UNPAID leave from work as follows:	
Commencing:	
Ending: Number of days to be taken:	
Please Note: Unpaid leave <u>cannot</u> be taken until all leave en no unpaid leave can be taken without the prior authorisation	of Richard or Martin.
Employee's Signature:	ECIALIST JOINERY LTD
Authorised by:	27 OCT 2002
J.R. Hayhoe:	E-TION 6
M. O'Brien:	Office use only: Days remaining5
DOCUMENT REFERENCE: ADM-FM-001 HOLIDAY REQUEST FORM DOCUMENT OWNER: DS ADM-FM-001 VERSION NO: 1.1 CREATION DATE: LAST REVISION DATE: NEXT REVIEW DATE:	27/03/2013 22/12/2021 Page 1 of 1 TBC